1. Incident Name	2. Operational Period (Date/Time)	INCIDENT OBJECTIVES
Lindsey Lake Tanker Spill	From: 16 Feb 2019 / 0700 To: 17 Feb 2019 / 0700	ICS 202-CG
I-84, MP 54		
3. Objective(s)		
Ensure safety of responders and the public Contain and recover diesel fuel at collection point (foot Prevent fuel from entering Columbia River Maximize protection of environmental and cultural reso Keep public and resources trustees informed		
4. Operational Period Command Emphasis (Safety Me	essage, Priorities, Key Decisions/Directions)	
 Safety for all personnel working on and near water. Utilize air monitoring data to require respirator use if ne Initiate flushing and recovery operations using water dr 		
Approved Site Safety Plan Located at: Incident Command Post, Viento State Park, Cascade Locks		
Prepared by: (Planning Section Chief)John Berger	Date/Time 15 Feb 2019	/ 1500

ICS 202-CG (Rev 4/04) INCIDENT OBJECTIVES

INCIDENT OBJECTIVES (ICS 202-CG)

Purpose. The Incident Objectives form describes the basic incident strategy, control objectives, command emphasis/priorities, and safety considerations for use during the next operational period.

Preparation. The Incident Objectives form is completed by the Planning Section following each Command and General Staff Meeting conducted in preparing the Incident Action Plan.

Distribution. The Incident Objectives form will be reproduced with the IAP and given to all supervisory personnel at the Section, Branch, Division/Group, and Unit levels. All completed original forms MUST be given to the Documentation Unit.

Item#	Item Title	<u>Instructions</u>
1.	Incident Name	Enter the name assigned to the incident.
2.	Operational Period	Enter the time interval for which the form applies. Record the start and end date and time.
3.	Objective(s)	Enter clear, concise statements of the objectives for managing the response. These objectives are for the incident response for this operational period and for the duration of the incident. Include alternatives.
4.	Operational Period Command Emphasis	Enter clear, concise statements for safety message, priorities, and key command emphasis/decisions/directions. Enter information such as known safety hazards and specific precautions to be observed during this operational period. If available, a safety message should be referenced and attached. At the bottom of this box, enter the location where approved Site Safety Plan is available for review.
5.	Site Safety Plan Prepared By Date/Time	Note location of the approved Site Safety Plan. Enter the name of the Planning Section Chief completing the form. Enter date (month, day, year) and time prepared (24-hour clock).

NOTE: ICS 202-CG, Incident Objectives, serves as part of the Incident Action Plan (IAP)

INCIDENT OBJECTIVES ICS 202-CG (Rev 4/04)